Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	RECEIVE	COVER PAGE CALIFORNIA 460 FORM
SEE INSTRUCTIONS ON REVERSE	Statement covers period from01/01/2009 through06/30/2009	Date of election if applicable: 009 JUL 31 AM (Month, Day, Year)  CITY CLERK CITY OF LOD	For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4.  Primarily Formed Ballot Measure Committee Controlled Sponsored Uso Complete Pert6)  Primarily Formed Candidate/ Officeholder Committee Also Complete Part7)	2. Type of Statement:  PreelectionStatement Semi-annualStatement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement -Attach Form 495
3. Committee Information  COMMITTEE NAME (OR CANDIDATES NAME IF NO COMMITTEE)  Yes on Measure W, Sponsored by the Lodi Chamber of Committee and Chamber of Committee of Commit	ODE AREA CODEIPHONE (209) 367-7840 OOX	Lodi, CA 95240  NAME OF ASSISTANT TREASURER, IF ANY  Amy Wilson  MAILING ADDRESS  319 Main Street	ZIP CODE AREA CODEIPHONE (209) 367-7840  ZIP CODE AREA CODEIPHONE (209) 669-0880
under penalty of perjury under the laws of the State of Californi  Executed on07/31/2009 Date  Executed on07/31/2009 Date	a that the foregoing is true and correct.  By  By	OPTIONAL: FAX / E-MAIL ADDRESS  Nowledge the information contained herein and in the attached second signature of Yeasurer Grassitiant Trabeters  Signature of Yeasurer Grassitiant Trabeters  Ontrolling Officeholder, Candidate, State Measure Proponentor Responsible Officer of Second	schedules is true and complete. I certify
Date  Executed on  Date	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent  Signature of Controlling Officeholder, Candidate, State Measure Proponent	EDDC Form 460 ( horsings/INF)

Officeholder or Candidate Controlled Comm	nittee	6.	Primarily Formed Ballo	ot Measure	Committee	<b>,</b>	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE Lodi Redevelopment Cre	ation			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)		BALLOT NO, OR LETTER W	JURISDICTION City of L			SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling off	iceholder, car	ndidate, or st	ate measure p	proponent, if any.
			NAME OF OFFICEHOLDER, CAN	IDIDATE, OR PR	OPONENT		
Related Committees Not Included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME  NAME OF TREASURER	I.D. NUMBER  CONTROLLED COMMITTEE?	7.	Primarily Formed Canofficeholder(s) or candidate(s	didate/Offic	eholder Co	ommittee Lis	st names of ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)		NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	IGHT OR HELD	SUPPORT OPPOSE
•	CODE AREA CODE/PHONE		Atta	ch continuatio	on sheets if	necessary	•

#### **Campaign DisclosureStatement Summary Page**

Type or print in ink. Amounts may be rounded to whole dollars.

SUMMARYPAGE CALIFORNIA FORM Statement covers period 01/01/2009 from 06/30/2009 \_Page3of<del>\_22\_\_\_</del> through -I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)	Column B CALENDARYEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
. Monetary Contributions Schedule A, Line 3	\$ 43,069.00	\$ 43,069.00	
2. Loans Received ScheduleB, Line 3	0.00	0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTALCASH CONTRIBUTIONS Add Lines 1 + 2	\$ 43,069.00	\$ 43,069.00	20. Contributions Received \$\$
4. Nonmonetary Contributions ScheduleC, Line 3	5,068.17	5,068.17	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4	\$ 48,137.17	\$48,137.17	Made \$\$
Expenditures Made			Expenditure Limit Summary for State
	\$ 46,509.85	\$ 46,509.85	Candidates
7. Loans Made Schedule H, Line 3	0.00	0.00	22. Cumulative Expenditures Made*
3. SUBTOTALCASH PAYMENTS Add Lines 6 + 7	\$ 46,509.85	\$ 46,509.85	(If Subject to Voluntary ExpenditureLimit)
9. Accrued Expenses (Unpaid Bills) ScheduleF, Line 3	1,260.50	1,800.50	Date of Election Total to Date
10. Nonmonetary Adjustment ScheduleC, Line3	5,068.17	5,068.17	(mm/dd/yy)
11. TOTALEXPENDITURES MADE Add Lines 8 + 9 + 10	\$52,838.52	\$53,378.52	\$
Current Cash Statement			<b>-</b> \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$3,982.22	To calculate Column B, add	
13. Cash Receipts Column A, Line 3 above	43,069.00	amounts in Column A to the corresponding amounts	
14. Miscellaneous Increases to Cash Schedulel, Line 4	700.00	from Column B of your last	'Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above	46,509.85	report. Some amounts in Column A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$1,241.37	figures that should be	
If this is a termination statement, Line 16 must be zero.		subtracted from previous period amounts. If this is	
17. LOAN GUARANTEES RECEIVED	\$0.00	the first report being filed for this calendar year, only carry over the amounts	
Cash Equivalents and Outstanding Debts		from Lines 2, 7, and 9 (if any).	
18. Cash EquivalentsSee instructions on reverse	\$0.00		
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 1,800.50		FPPC Form 460 (Januar

### Schedule A

Type or print in ink.

SCHEDULE A
------------

Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement covers period from01/01/2009	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through06/30/2009	Page4 of22
NAME OF FILER Yes on Measure W, Sponsored by the Lodi Chamber of Commerc	ce		ID. <b>NUMBER</b> 1314058

					•	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOF (IF COMMITTEE.ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATIONAND EMPLOYER (IFSELF-EMPLOYED. ENTER NAME OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/09/2009	MEEHLEIS MODULAR BUILDINGS, INC.  1303 EAST LODI AVE.  Lodi, CA 95240	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00	1,000.00	
01/13/2009	DG LAND COMPANY P.O. BOX 757 Woodbridge, CA 95258	OTH		100.00	100.00	
02/02/2009	GOOD EARTH FARMS, LLC P.O. BOX 670 Woodbridge, CA 95258-0670	□IND □COM □OTH □PTY □SCC		250.00	250.00	
02/03/2009	NORTHERN CALIFORNIA CARPENTERS REGIONAL COUNCIL ISSUES (#1219354)  265 HEGENBERGER ROAD SUITE 200 Oakland, CA 94621	AGIND COM OTH PTY SCC		3,000.00	3,000.oc	
02/04/2009	KAUTZ FARMS  5490 BEAR CREEK RD.  Lodi, CA 95240	□IND □COM 図OTH □PTY □SCC		250.00	250.00	
			SUBTOTAL\$	4,600.00		
1. Amount re (Include al	A Summary ceived this period — itemized monetary contributions. I Schedule A subtotals.)			42,450.00 619.00	(other	
3. Total mone	ceived this period – uniternized monetary contributions etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu			43,069.00	PTY - Politica	

IARGARET MCKENZIE

**B51 TILDEN DRIVE** 

Lodi, CA 95242

306 SHADY ACRES DR.

1298 W. JAHANT ROAD

Acampo, CA 95220

Stockton, CA 95201

1642 TIMBERLAKE CIRCLE

Lodi, CA 95242

TOCKTON BLUEPRINT & SUPPLY CO.

Lodi, CA 95324

ANGETWINS, INC.

P.O. BOX 1874

RIC DAEGLING

IICK SPANOS JR.

Type or print in ink.
Amounts may be rounded to whole **dollars.** 

CODE \*

□сом

OTH PTY

SCC

X IND

COM

OTH PTY

SCC

COM

OTH PTY

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SCC

X IND

COM

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□scc

SCHEDULEA (C	CONT.)	)
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Statement covers period	CALIFORNIA 160		
from 01/01/2009	FORM 400		
through _06/30/2009	Page 5 of 22		
	I.D. NUMBER		
	1314058		

NAME OF FILER

DATE

**RECEIVED** 

02/04/2009

02/05/2009

02/06/2009

02/08/2009

02/12/2009

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR

(IFCOMMITTEE, ALSO ENTER I.D. NUMBER)

IF AN INDIVIDUAL, ENTER OCCUPATIONAND EMPLOYER (IF SELF-EMPLOYEDENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
OCTOR	250.00	250.00	
OMG			
HARMACIST	100.00	100.00	
ELF-EMPLOYED			
	100.00	100.00	
	250.00	250.00	
SANKER	100.00	100.00	

800.00

SUBTOTAL\$

"Contributor Codes
IND-Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - PoliticalParty
SCC-SmallContributorCommittee

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)
--------------------

Statement covers period	CALIFORNIA 160
from /01/2009	FORM 400
through_06/30/2009	Page 6 of 22
	I.D. NUMBER
	1314059

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE CONTRIBUTOR OCCUPATIONAND EMPLOYER **RECEIVED THIS** CALENDAR YEAR TO DATE (IFCOMMITTEE.ALSO ENTER I.D. NUMBER) RECEIVED CODE PERIOD (IFSELF-EMPLOYEDENTERNAME (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) STEVE MANN XIND ☐ COM 02/13/2009 SELF-EMPLOYED 100.00 100.00 111 N. CRESCENT Потн ACTION COACH PTY Lodi, CA 95240 SCC DAVID FISHER 02/18/2009 PROPERTY MANAGER 500.00 500.00 ПСОМ 2000 W. BROVELLI WOODS OTH RPM CO. ☐ PTY Acampo, CA 95220 SCC ISSUES MOBILIZATION POLITICAL ACTION COMMITTEE (#782560) 02/18/2009 7.500.00 IND X COM 7,500.00 525 S. VIRGIL AVENUE Потн □PTY LOS ANGELES, CA 90020 □scc M & R COMPANY 500.00 02/18/2009 500.00 COM Потн 33 E. TOKAY ST. □PTY Lodi, CA 95240 □scc PAQ, INC. DBA STOCKTON/LODI FOOD 4 LESS IND 7,000.00 7,000.00 02/18/2009 Псом 8014 N. LOWER SACRAMENTO RD., STE 1 X OTH □ PTY Stockton, CA 95210 SCC SUBTOTAL \$15,600.00

\*Contributor Codes
IND-Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

	CTNO:

Statement covers period	CALIFORNIA 160
from01/01/2009	FORM 400
through 06/30/2009	Page 7 of 22
	I.D.NUMBER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

1314058

					1	
DATE RECEIVED <sub>-</sub>	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOF (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVETO DATE CALENDAR YEAR (JAN. 1 * DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/18/2009	BARTON ROBERTSON 25000 SEQUA LANE Acampo, CA 95220	IND  COM  OTH  PTY  SCC	ARTNER  DALE GILLESPIE, RPM COMPANY	500.00	500.00	
02/20/2009	BIPAC OF THE DELTA (#881369)  509 W. WEBER AVE. STE 410  Stockton, CA 95203-3167	□IND  IND  OTH  PTY  SCC		2,000.00	2,000.00	
02/20/2009	DONNIE GARIBALDI  1311 RIVERGATE DRIVE  Lodi, CA 95240	IND  COM  OTH  PTY  SCC	'ARTNER	500.00	500.00	
02/20/2009	JERRY GLENN  2443 MAC ARTHUR WAY  Lodi, CA 95242-3252	⊠IND □COM □OTH □PTY □SCC	≀ETIRED	100.00	100.00	
02/23/2009	BROWMAN DEVELOPMENT COMPANY, INC.  1556 PARKSIDE DRIVE  Walnut Creek, CA 94596	□IND □COM ☑OTH □PTY □SCC		750.00	750.00	
			SUBTOTALS	3,850.00		

\*Contributor Codes

IND-Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity)

PTY-PoliticalParty

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (86612754772)

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA FORM from 01/01/2009 through 06/30/2009 Page 8 of 22

I.D. NUMBER

SCHEDULEA (CONT.)

Yes on Measu	re W, Sponsored by the Lodi Chamber of Commerce				1314	1058	
RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTIOR	IF AN INDIVIDUAL, ENTER OCCUPATIONAND EMPLOYER (IFSELF-EMPLOYEDENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVETODATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION <b>TO</b> DATE  (IF REQUIRED)	
02/24/2009	GEORGE WILLIAM BENSCH M.D.  25050 N. WILD HARE LANE ACAMPO, CA 95220	XIND COM OTH PTY SCC	DOCTOR SELF-EMPLOYED	500.00	500.00		
02/26/2009	MOKELUMNE LAND & DEVELOPMENT COMPANY, LLC P.O. BOX 1566 Woodbridge, CA 95258	□IND □COM □OTH □PTY □SCC		100.00	100.00		
02/27/2009	GEWEKE ASSET MANAGEMENT P.O. BOX 1420 Lodi, CA 95241	□IND □COM □OTH □PTY □SCC		500.00	500.00		
02/27/2009	ROBERT PFEIL  2358 PHEASANT RUN CIRCLE  Stockton, CA 95207-5210	HIND COM OTH PTY SCC	VICE PRESIDENT OF ACQUISITIONS RPM COMPANY	500.00	500.00		
02/27/2009	WAL-MART STORES, INC.  702 S.W. 8TH STREET  Bentonville, AR 72716	□IND □COM □OTH □PTY □SCC		10,000.00	10,000.00		
SUBTOTAL \$11,600.00							

\*Contributor Codes IND-Individual COM - RecipientCommittee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC-Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

	OOI ILDOLLA (OOIVI.)
Statement covers period	CALIFORNIA 460
from 01/01/2009	FORM 400
through <u>06/30/2009</u>	Page9 o f 2 2
	ID NUMBER

NAME OF FILER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

1314058

SCHEDITE A (CONT.)

					·	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	IF AN INDIVIDUAL, ENTER OCCUPATIONAND EMPLOYER (IF SELF-EMPLOYED,ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/16/2009	PARENTS & TEACHERS FOR NORTH STOCKTON SCHOOLS  4555 PERSHING AVE #33-153  Stockton, CA 95207	□IND □COM □OTH □PTY □SCC		5,000.00	5,000.00	
06/30/2009	DAVID KIRSTEN  1324 MIDVALE RD.  Lodi, CA 95240	IND  COM  OTH  PTY  SCC	SELF-EMPLOYED  (IRSTEN COMPANY, LLC	1,000.00	1,000.00	
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				
			SUBTOTALS	6,000.00		

\*Contributor Codes
IND-Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - PoliticalParty
SCC - Small Contributor Committee

#### Schedule C Nonmonetary Contributions Received

Type or print in ink. Amounts may be rounded towhole dollars.

SCHEDULE C Statement covers period **CALIFORNIA FORM** 01/01/2009 from through <u>06/30/2009</u> I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

1314058

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	IF AN INDIVIDUAL, ENTER OCCUPATIONAND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTIONOF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
01/13/2009	KIRSTEN COMPANY LLC P.O. BOX 2607 Lodi, CA 95241	□IND □COM ☑OTH □PTY □SCC		CCOMMODATIONS FFICE SUPPLIES, OFFEE & BAGELS, OSTAGE	955.00	955.00	
04/30/2009	WASTE MANAGEMENT  P.O. BOX 3027  Houston, TX 77253-3027	□IND □COM □OTH □PTY □SCC		N-KIND PAYMENT 3R POLLING COSTS	700.00	5,000.00	
04/30/2009	WASTE MANAGEMENT  P.O. BOX 3027  Houston, TX 77253-3027	□IND □COM ☑OTH □PTY □SCC		ill Paid By hird Party	4,300.00	5,000.00	
		□IND □COM □OTH □PTY □SCC					
Attach additional information on appropriately labeled continuation sheets.  SUBTOTAL \$ 5,955.00							

#### **Schedule C Summary**

1. Amount received this period — itemized nonmonetary contributions.		
(Include all Schedule C subtotals.)	\$ -	5,000.00
2. Amount received this period – unitemized nonmonetary contributions of less than \$1 00	¢	68.17
2. Amount received this period tunitemized noninonetary contributions of less than \$1.00	φ.	

\*Contributor Codes IND-Individual COM - Recipient Committee (other than P N or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC-Small Contributor Committee

3. Total nonmonetary contributions received this period. 5,068.17 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... TOTAL \$

> FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

# Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULE
	Statement covers period	CALIFORNIA 460
-	from01/01/2009	FORM TOU
***	through06/30/2009	Page11 of22
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Yes on Measure W, Sponsored by the Lodi Chamber of Commerce 1314058 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE LODI CHAMBER OF COMMERCE - POLITICAL ACTION COMMITTEE 06/30/2009 950.00 950.00 Contribution X Nonmonetary Contribution ☐ Independent Expenditure □ Oppose X Support Contribution □ Nonmonetary Contribution ☐ Independent Expenditure ☐ Support Oppose ☐ Monetary Contribution □ Nonmonetary Contribution ☐ Independent Expenditure ☐ Support Oppose **SUBTOTAL \$** 950.00 **Schedule D Summary** 950.00 2. Unitemized contributions and independent expenditures made this period of under \$100 ......\$ \_\_\_\_ 0.00 950.00 

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			Statement covers period from 01/01/2009			CALIFO FOR			
SEE INSTRUCTIONS ON REVERSE					thro	ugh06	/30/2009	)	Page —	<del>-12</del> of <u>-55</u>
NAME OF FILER Yes on Measure W, Sponsored by the Lodi Chamber of Commerce									I.D. NUM 131405	
CODES: If one of the following codes accurately described campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)'  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)'  LEG legal defense campaign literature and mailings	es the payment, you make member commod meetings an office expersuption circular phone banks polling and spostage, delended professional print ads	nmunication d appearar nses ulating s survey rese ivery and r	s nces earch nessenge	er services	RAD RFD SAL TEL TRC TRS TSF VOT	radio airt returned campaig t.v. or ca candidat staff/spot transfer I voter reg	ime and p contribution workers' ble airtime travel, loouse travel, between contistration	roduction ons salaries and produdging, and lodging, a committees	uction costs meals and meals	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IFCOMMITTEE, ALSO ENTERI, D, NUMBER)		CODE	OR		DESCRIPTION	NOF PAYM	ENT			AMOUNT PAID
US POSTMASTER  1313 ARCH-AIRPORT RD. Stockton, CA 95210										1,000.00
US POSTMASTER		POS	-							3,270.69
1313 ARCH-AIRPORT RD. Stockton, CA 95210										
RUTAN & TUCKER, LLP		PRO								551.67
3000 EL CAMINO REAL, SUITE 200 Palo Alto, CA 94306										
* Payments that are contributions or independent expenditures	must also be summ	arized on	Schedu	le D.				SUE	BTOTAL\$	4,822.36
Schedule E Summary										
1. Itemized payments made this period. (Include all Schedul	e E subtotals.)								\$	46,389.85
2. Unitermized navments made this period of under \$100									•	120.00

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ......

0.00

	(CON	

#### Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded to whole dollars.

		OOTTEDOLL L (OOIVI.)
Staten	nent covers period	CALIFORNIA / 60
from	01/01/2009	FORM TOO
through_	06/30/2009	Page 13 of
		I.D. NUMBER
		1314058

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CVP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants RFD MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)' OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks stafflspouse travel, lodging, and meals FND fundraising events polling and survey research TRS POL transfer between committees of the same candidate/sponsor POS TSF ND independent expenditure supportinglopposing others (explain) postage, delivery and messenger Services LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT WEB information technology costs (internet, e-mail) print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I,D. NUMBER)	CODE	C	OR DESCRIPTION OF PAYMENT	А	MOUNT PAID
STRATEGIC RESEARCH					
3333 W. COUNTRY CLUB BLVD. Stockton, CA 95204	CNS				4,066.51
STRATEGIC RESEARCH					
3333 W. COUNTRY CLUB BLVD. Stockton, CA 95204	CNS				5,870.82
STRATEGIC RESEARCH					
3333 W. COUNTRY CLUB BLVD. Stockton, CA 95204	CNS				6,600.53
STRATEGIC RESEARCH					
3333 W. COUNTRY CLUB BLVD. Stockton, CA 95204	CNS				2,485.16
STRATEGIC RESEARCH					
3333 W. COUNTRY CLUB BLVD. Stockton, CA 95204	CNS				4,836.86
* Payments that are contributions or independent expenditures must also be summarized on	Schedule	D.	SUBTO	TAL\$	23,859.88

#### SCHEDULE FICONT.

#### Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

		OOI ILDOLL L (OOIVI
Statement covers period		CALIFORNIA 460
from	01/01/2009	FORM TOO
through_	06/30/2009	Page 1 4 o f 2 2
		I.D. NUMBER

1314058

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances RFD returned contributions CNS campaign consultants CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PET FIL candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals PHO FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals POL postage, delivery and messenger services transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)\* TSF ND POS LEG legal defense PRO professional services (legal, accounting) VOT voter registration print ads campaign literature and mailings WEB information technology costs (internet, e-mail) PRT

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, <b>ALSO</b> ENTER I.D. NUMBER)	CODE	0	OR DESCRIPTION <b>OF</b> PAYMENT	AMOUNT PAID
STRATEGIC RESEARCH				
3333 W. COUNTRY CLUB BLVD. Stockton, CA 95204	CNS			4,840.62
STRATEGIC RESEARCH				
3333 W. COUNTRY CLUB BLVD. Stockton, CA 95204	CNS			4,863.29
ABUNDANCE VINEYARDS				
1150 W. TURNER RD. LODI, CA 95242	MTG			123.70
DEGRANDE'S CAFE				
2370 MAGGIO CIRCLE #14 Lodi, CA 95240	MTG			225.00
STRATEGIC RESEARCH				
3333 W. COUNTRY CLUB BLVD. Stockton, CA 95204	POL			4,300.00
**		_	SURTOTAL	14 252 61

\* Payments that are contributions or independent excenditures must also be summarized on Schedule D. SUBTOTAL 14,352.61

Schedule E	
(Continuation She	et)
Payments Made	_

Type or print in ink.

Amounts may be rounded to whole **dollars.** 

SCHEDULE E (CONT.)

Statement covers period		ent covers period	CALIFORNIA 160		
	from	01/01/2009	FORM 400		
	through_	06/30/2009	Page15 of <u>22</u>		
			I.D. NUMBER		
		_	1314058		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalialmisc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions office expenses CTB contribution (explain nonmonetary)\* OFC SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks TRS staff/spouse travel, lodging, and meals FND fundraising events POLpolling and survey research ND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor legal defense PRO professional services (legal, accounting) VOT voter registration LEG campaign literature and mailings PRT WEB information technology costs (internet, e-mail) print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTIONOF PAYMENT	AMOUNT PAID
RUTAN & TUCKER, LLP				
3000 EL CAMINO REAL, SUITE 200 Palo Alto, CA 94306	PRO			540.00
WAHL, WILLEMSE & WILSON, LLP				
319 E. MAIN STREET Turlock. CA 95380	PRO			195.00
RUTAN & TUCKER, LLP				
3000 EL CAMINO REAL, SUITE 200 Palo Alto, CA 94306	PRO			750.00
WAHL, WILLEMSE & WILSON, LLP	<u>,                                      </u>	+		
319 E. MAIN STREET Turlock. CA 95380	PRO			305.00
WAHL, WILLEMSE & WILSON, LLP	İ	$\top$		
319 E. MAIN STREET Turlock, CA 95380	PRO			615.00
* Payments that are contributions or independent expenditures must also be summarized on	Schedule D.		SUBTOTAL	2,405.00

Schedule E (Continuation Sheet) **Payments Made** 

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period	CALIFORNIA 160
from01/01/2009	FORM 400
through 06/30/2009	Page 1 6 o f 2 2
	I.D. NUMBER
	1314058

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs PET phone banks TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services transfer between committees of the same candidate/sponsor POS TSF voter registration professional services (legal, accounting) LEG legal defense

campaign literature and mailings PRT WEB information technology costs (internet, e-mail) print ads NAME AND ADDRESS OF PAYEE

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	R DESCRIPTION OF PAYMENT	AMOUNT PAID
WAHL, WILLEMSE & WILSON, LLP  319 E. MAIN STREET Turlock, CA 95380			[N-KIND PAYMENT MADE FOR LODI CHAMBER OF COMMERCE - POLITICAL ACTION COMMITTEE (ID#1307800) FOR PROFESSION PRO	ONAL 950.00
**	<del>                                     </del>	<u>+</u>	SUBTOTAL	¢ 050.00

\* Paymentsthat are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**\$

950.00

#### Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.

Amounts may be rounded to whole dollars.

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

Statement covers period C
from 01/01/2009 through 06/30/2009

CALIFORNIA 460

NAME **OF** FILER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

I.D. NUMBER 1314058

CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)'  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  ND independent expenditure supporting/opposing others (explain)'  LEG legal defense  LIT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads		TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registration	butions ters' salaries time and production cost l, lodging, and meals tivel, lodging, and meals committees of the sal	ils same candidate/sponsor	
JAI E AND AI OF REDITOI (IF DMMITTEE ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTIONOF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	
RUTAN & TUCKER, LLP  3000 EL CAMINO REAL, SUITE 200  Palo Alto, CA 94306	PRO	540.00	0.00	540.00	0.00	
LODI CHAMBER OF COMMERCE  35 S SCHOOL STREET Lodi, CA 95240	OFC		1,800.50		1,800.50	
Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	540.00	1,800.50	540.00	1,800.50	

#### **Schedule F Summary**

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for		
accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	INCURRED TOTALS \$	1,800.50

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and	
on the Summary Page, Column A, Line 9.)	NET \$ 1,260.50 May be a negative number

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

		S	CHEDULE G
Statement covers period		CALIFORNIA	460
	from 01/01/2009	FORM	<b>40U</b>
	through06/30/2009		
•		I.D. NUMBER	
		1314058	

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

MBR member communications

CNS campaign consultants

MBR member communications

MBR member communicat

CTB contribution (explain nonmonetary)'

CVC civic donations

FIL candidate filing/ballot fees

OFC office expenses

PET petition circulating

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

FND fundraising events FND independent expenditure supporting/opposing others (explain)\* FNS priorie banks FNS priorie banks FNS priorie banks FNS cariodate traver, lodging, and meals staff/spouse travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (	OR DESCRIPTIONOF PAYMENT	AMOUNT PAID
SP GRAPHICS	LIT		1,706.98
7917 FRUITRIDGE RD. SUITE F			
Sacramento CA 95820			
LODI PRINTING COMPANY	LIT		573.23
2 LOUIE AVENUE			
Lodi CA 95240			
CURRY GRAPHICS	CMP		2,045.00
24835 EICHLER STREET			
Hayward CA 94545			
LODI PRINTING COMPANY	LIT		2,315.55
2 LOUIE AVENUE			
Lodi CA 95240			
			TOTAL* \$ 6,640.76

<sup>•</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Type or print in ink.
Amounts may be rounded to whole dollars.

		SCHEDULE	Ŀ	
Statem	ent covers period	CALIFORNIA 460	460	
from01/	01/01/2009	FORM 400		
through_	06/30/2009	Page — 19 of — 22		

SEE INSTRUCTIONSON REVERSE

NAME OF FILER

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

I.D. NUMBER 1314058

NAME OF AGENT OR INDEPENDENT CONTRACTOR

STRATEGIC RESEARCH

COI	<b>DES:</b> If one of the following codes accurately describe	es the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks		candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)		voter registration
ЦT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IFCOMMITTEE. $ALSO$ ENTER I.D. NUMBER)	CODE OR	DESCRIPTIONOF PAYMENT	AMOUNT PAID
SP GRAPHICS	LIT		5,435.24
7917 FRUITRIDGE RD. SUITE F			
Sacramento CA 95820			
ABS PRESORT	LIT		912.86
4724 ENTERPRISE WAY			
Modesto CA 94545			
CURRY GRAPHICS	CMP		2,547.02
24835 EICHLER STREET			
Hayward CA 94545			
SP GRAPHICS	LIT		2,083.00
7917 FRUITRIDGE RD. SUITE F			
Sacramento CA 95820			
			TOTAL * C

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$ 10,978.12

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

SEE INSTRUCTIONSON REVERSE

NAME OF FILER

Type or print in ink
Amounts may be rounded
to whole dollars.

		SCHEDULE G
Statement covers period		CALIFORNIA / CO
from	01/01/2009	FORM 400
through_	06/30/2009	Page20
		I.D. NUMBER
		1314058

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs **CNS** campaign consultants returned contributions MTG meetings and appearances CTB contribution (explain nonmonetary)\* office expenses SAL campaign workers' salaries OFC CVC civic donations petition circulating TEL t.v. or cable airtime and production costs PET candidate filing/ballot fees candidate travel, lodging, and meals FILPHO phone banks FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor ND independent expenditure supportinglopposing others (explain)' POS postage, delivery and messenger services TSF LEG legal defense PRO professional services (legal, accounting) **VOT** voter registration WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads

<sup>\*</sup> Paymentsthat are contributions or independent expenditures must also be summarized on Schedule D.

NAMEAND ADDRESS <b>OF</b> PAYEE OR CREDITOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTIONOF PAYMENT	AMOUNT PAID
AMERICAN MAIL	LIT			619.85
8353 DEMETRE AVENUE				
SACRAMENTO CA 95828-0920				
USPS	POS			1,510.00
4245 WEST LN				
STOCKTON CA 95204				
SP GRAPHICS	LIT	1		2,112.00
7917 FRUITRIDGE RD. SUITE F				
Sacramento CA 95820				
COMPETITIVE EDGE	РНО			4,000.00
2170 4TH AVENUE				
SAN DIEGO CA 92101				
		ļ		

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 8,241.85

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE G Statement covers period **CALIFORNIA FORM** 01/01/2009 from through\_ 06/30/2009 I.D. NUMBER 1314058

NAME OF FILER Yes on Measure W, Sponsored by the Lodi Chamber of Commerce

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* OFC office expenses CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees candidate travel, lodging, and meals РНО phone banks FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supportinglopposing others (explain)\* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor ND POS LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings LIT PRT print ads WEB information technology costs (internet, e-mail)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (	OR DESCRIPTIONOF PAYMENT	AMOUNT PAID
FALLON RESEARCH	POL		8,000.00
P.O. BOX 12181			
Columbus OH 43212			
		,	

TOTAL\* \$ 8.000.00

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

# Schedule I

Type or print in ink.

SCHEDULE I

Viiscellane	eous Increases to Cash	Amounts may be rounded to whole dollars.	from 01/01/2009	california 460
SEE INSTRUCTION	NSON REVERSE		through_06/30/2009	Page 2 2 of
NAME OF FILER				.D. NUMBER
es on Measur	re W, Sponsored by the Lodi Chamber of Commerce			1314058
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE ALSO ENTER ID NUMBER)	DES	SCRIPTIONOF RECEIPT	AMOUNT OF INCREASETO CASH
06/ <sup>3</sup> 0/2009	STRATEGIC RESEARCH	REFUND OF FEES-P	OLLING	700.00
	3333 W. COUNTRY CLUB BLW			
	Stockton, CA 95204			
Attach addi	itional information on appropriately labeled continuation sheets.	,	SUBTOTAI	L\$ 700.00
Schedule I	Summary			
1. Itemized in	ncreases to cash this period		\$	0
2. Unitemized	d increases to cash of under \$100 this period		\$0.0	0
	interest received this period on loans made to others. (Sci		\$0.0	0
4. Total misce Summary	ellaneous increases to cash this period. (Add Lines 1, 2, a Page, Line <b>14.)</b>	and 3. Enter here and on the	TOTAL \$	<u>o</u>

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)